



"No child or senior without a Christmas"

31455 W. Eleven Mile Road
Farmington Hills, MI 48336
www.goodfellows.info

(248) 986-1111
Fax (248) 986-1010
info@goodfellows.info

Dear Friend and Neighbor:

The Farmington Area Goodfellows is in the process of making inquiries regarding any assistance you may need for your family this holiday season. We would like to help; however, we need you to submit certain information to verify that you qualify. **(Must live in Farmington or Farmington Hills)**

Please fill out the following forms completely to ensure a happy holiday for your children **(ages 12 years and younger only)**:

2025 Holiday Application Form
2025 Toy Request Form (no electronic toys)
2025 Diaper Request Form (if needed)

Attach current paperwork (see attached for details) to the application and either mail to the address above, email to fagoodfellows@gmail.com or fax (248) 986-1010. The Goodfellows will then process the application and contact you if we have any questions.

**YOUR APPLICATION MUST BE RECEIVED BY
TUESDAY NOVEMBER 25, 2025.**

For holiday assistance for children **13 years and older** please contact:

FARMINGTON YOUTH ASSISTANCE

1-248-489-3434

fya@fpsk12.net

To ensure fairness, we work with other local charities providing holiday assistance to eliminate any duplication of requests.

If you have any questions about the information needed on the forms, please contact us at the phone number or email address shown above.

Thank you,

The Farmington Area Goodfellows



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2025 HOLIDAY ASSISTANCE APPLICATION

**GOODFELLOWS
USE ONLY**

FAMILY#

The deadline for returning this application, along with proof of income and residency is **Tuesday November 25, 2025**. We are not able to accept late applications. Submit by mailing to the address above, faxing to (248) 986-1010, or emailing to fagoodfellows@gmail.com. If you have questions or require help with this application, call (248) 986-1111.

Saturday, December 20 is Delivery Day. An adult must be inside the home between 9:00am and 12:00pm to accept delivery.

PLEASE COMPLETE ALL PAGES OF THIS APPLICATION PACKAGE, INCLUDING TOY AND DIAPER REQUESTS

Family (Last) Name:	<input type="text"/>	Mother's Name:	<input type="text"/>
Mother's Maiden Name:	<input type="text"/>	Father's Name:	<input type="text"/>
Street Address:	<input type="text"/>		
<input type="checkbox"/> Farmington	<input type="checkbox"/> Farmington Hills	<input type="checkbox"/> Northville (mailing address)	Zip Code: <input type="text"/>
Apt. Complex Name:	<input type="text"/>	Apt#:	<input type="text"/>
		Bldg#:	<input type="text"/>
Cell Phone:	<input type="text"/>	Home Phone:	<input type="text"/>
Email:	<input type="text"/>		
Is your family enrolled in the Farmington Public School's Head Start or GSRP Program? <input type="checkbox"/> Yes <input type="checkbox"/> No			
List below all persons living in the household that are employed:			
Name:	<input type="text"/>	Employer:	<input type="text"/>
Name:	<input type="text"/>	Employer:	<input type="text"/>
Name:	<input type="text"/>	Employer:	<input type="text"/>
Do you currently receive child support? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, monthly amount \$	<input type="text"/>

TO QUALIFY YOU MUST BE A RESIDENT OF FARMINGTON OR FARMINGTON HILLS AND INCLUDE THE FOLLOWING DOCUMENTS

PROOF OF INCOME: SUBMIT ALL OF THESE DOCUMENTS THAT ARE APPLICABLE

- 2025 Current Pay Stub showing Year-to-Date Earnings
- 2024 Federal 1040 Tax Return (first page only) showing adjusted gross income (AGI)
- 2025 Current F.I.P. bank statement showing monthly deposits
- 2025 Social Security Disability (SSI, SSD) for each family member bank statement showing monthly deposits
- 2025 Unemployment bank statement showing monthly deposits

We are not able to accept Food Assistance Letters (FAP) as proof of income

PROOF OF RESIDENCY: SUBMIT ONLY ONE OF THESE DOCUMENTS showing both the **name and address used on this application**

- A current, signed lease for your home or apartment
- A copy of your October or November 2025 utility bill (Consumers Energy or DTE Energy)

We are not able to accept Government ID, telephone, internet, cable TV or other bills as proof of residency

Applicant Signature

Date

FAMILY#

CHILD NAME	BOY GIRL	AGE	SCHOOL	TOY SUGGESTIONS		BOOK SUGGESTIONS
				1	2	
				3	4	
				1	2	
				3	4	
				1	2	
				3	4	
				1	2	
				3	4	
				1	2	
				3	4	
				1	2	
				3	4	



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2025 FARMINGTON AREA GOODFELLOWS DIAPER APPLICATION

For Goodfellow
Use Only:
Family#

ONLY ONE SIZE DIAPER PER CHILD

Must be 3 years or younger

Last Name:

Address:

Child Name	Child Name	Child Name	Child Name	Child Name
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Diapers

Size 1,2

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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3

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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4

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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5

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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6

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Pull Ups

2T - 3T Girl

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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3T - 4T Girl

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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4T - 5T Girl

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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2T - 3T Boy

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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3T - 4T Boy

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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4T - 5T Boy

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Good Nites

Sm/Md Girl

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Lg/XL Girl

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Sm/Md Boy

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Lg/XL Boy

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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This form and others available online at: www.goodfellows.info.